EMBASSY OF THE UNITED STATES OF AMERICA

AMERICAN CITIZEN SERVICES 24 GROSVENOR SQUARE LONDON W1A 2LQ

$\frac{\textbf{REQUEST FOR INFORMATION FOR PREPARATION OF}}{\textbf{FOREIGN SERVICE REPORT OF DEATH}}$

Please provide the following information about the deceased and return the form to the above address together with the death certificate and the deceased's U.S. passport or naturalization certificate, or other proof of American citizenship. Please write clearly.

PERSONAL DATA	
FULL NAME:	
SOCIAL SECURITY NUMBER:	
DATE & PLACE OF BIRTH:	
DATE OF DEATH:	
PLACE OF DEATH:	
LAST U.S. ADDRESS:	
LAST UK ADDRESS:	
NEXT OF KIN: Name:	
Address:	
TRAVELING OR RESIDING WITH RELATIVES (OR FRIENDS AS FOLLOWS:
Name:	Relationship:
Address:	

(please turn over)

FUNERAL ARRANGEMENTS: BURIAL: Name & address of cemetery:_____ Grave number:_____ Date of burial: CREMATION: Name & address of crematorium:_____ When & where ashes scattered, interred or held: Date of cremation: **EFFECTS** (property of the deceased): CURRENT LOCATION OF EFFECTS: PERSON OR OFFICIAL RESPONSIBLE FOR CUSTODY & ACCOUNTING OF EFFECTS: Name: Address: If the deceased received regular payments from any of the following, please give the claim number and the amount received: Social Security: Veterans Administration:_____ Civil Service: Railroad Board: THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. Signature:

Name (printed)_____ Relationship to deceased: Tel No:_____